Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 1 of 58

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Cynthia	
	picture examp	government-issued ure identification (for	First name	First name
		mple, your driver's	Michelle	
	licer	ise or passport).	Middle name	Middle name
		g your picture	Mroz-Larsen	
		tification to your ting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.	Cindy Mroz-Larsen Cindy Larsen	
3.	Only	y the last 4 digits of		
J.	you num Indi	r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-0291	

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Page 2 of 58 Document Case number (if known)

Debtor 1 Cynthia Michelle Mroz-Larsen

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	219 Codor Long SE Ant FE	If Debtor 2 lives at a different address:
		218 Cedar Lane SE, Apt 55 Vienna, VA 22180	New London City City & 71D Co. In
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Fairfax County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 3 of 58

Debtor 1 Cynthia Michelle Mroz-Larsen

Case number (if known)

ar	t 2: Tell the Court About	Your I	Bankruptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankrup e box.	otcy
	choosing to file under		Chapter 7				
			Chapter 11				
			Chapter 12				
			Chapter 13				
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fee yo	k with the clerk's office in your local court for more of urself, you may pay with cash, cashier's check, or lalf, your attorney may pay with a credit card or check	money
					tallments. If you choose this optics (Official Form 103A).	on, sign and attach the Application for Individuals to	Pay
			I request that but is not req	at my fee be wa Juired to, waive y	ived (You may request this option your fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a judge ur income is less than 150% of the official poverty l ı installments). If you choose this option, you must t	ine that
						ial Form 103B) and file it with your petition.	out
).	Have you filed for bankruptcy within the	■ N					
	last 8 years?	ПΥ			1A/I	Occasional an	
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ N	lo				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	□ N	lo. Go to I	line 12.			
	residence:	■ Y	es. Has yo	our landlord obta	ained an eviction judgment agains	t you and do you want to stay in your residence?	
			•	No. Go to line	12.		
				Yes. Fill out Indibankruptcy pet		Judgment Against You (Form 101A) and file it with t	his

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Page 4 of 58 Document

Debtor 1 Cynthia Michelle Mroz-Larsen

Case number (if known)

ar	Report About Any Bu	sinesses	You Own as a Sole Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code				
	it to this petition.		Check the appropriate box to describe your business:				
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))				
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
			Stockbroker (as defined in 11 U.S.C. § 101(53A))				
			Commodity Broker (as defined in 11 U.S.C. § 101(6))				
			□ None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	ss debtor, see 11	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.	y			
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Cod	le.			
•ar	t 4: Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention				
4.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to public health or safety? Or do you own any						
	property that needs immediate attention?		If immediate attention is needed, why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?				
	- •		Number, Street, City, State & Zip Code				

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 5 of 58

Debtor 1 Cynthia Michelle Mroz-Larsen

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

	ca		

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Cynthia Michelle Mroz-Larsen Document Page 6 of 58 Case number (if known)

Part	6: Answer These Questi	ons for Re	porting Purposes			
16.	What kind of debts do you have?		Are your debts primarily consurindividual primarily for a personal,		in 11 U.S.C. § 101(8) as "incurred by an	
			_			
			Yes. Go to line 17.			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe that are not consumer debts or business debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availabl	u estimate that after any exempt property e to distribute to unsecured creditors?	is excluded and administrative expenses	
	administrative expenses are paid that funds will		□ No			
	be available for distribution to unsecured creditors?		□ Yes		tafter any exempt property is excluded and administrative expenses to unsecured creditors? 25,001-50,000	
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	5 0,001-100,000	
19.	How much do you estimate your assets to be worth?	□ \$0 - \$50,000 □ \$50,001 - \$100,000 ■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
20.	How much do you estimate your liabilities to be?	\$100,0	0,000 11 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
Part	:7: Sign Below					
For	•		, ,	. , , , ,	•	
		United Sta	ites Code. I understand the relief a	available under each chapter, and I choos	e to proceed under Chapter 7.	
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
/s/ Cynthia Michelle Mroz-Larsen Cynthia Michelle Mroz-Larsen Signature of Debtor 2 Signature of Debtor 1						
		Executed	On August 17, 2017 MM / DD / YYYY		D/YYYY	

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 7 of 58

Debtor 1 Cynthia Michelle Mroz-Larsen

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jeremy		Date	August 17, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Jeremy Hu	uang		
Printed name			
Woehrle D	ahlberg Jones Yao PLLC		
Firm name			
10615 Jud	icial Dr		
Suite 102			
Fairfax, VA	A 22030		
Number, Street,	City, State & ZIP Code		
Contact phone	7037550214	Email address	jhuang@lawfirmvirginia.com
76861			
Bar number & St	tate		

		DOCUM	eni Pade 8 di 58	
Fill in this infor	mation to identify your	case:		
Debtor 1	Cynthia Michelle	Mroz-Larsen		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	PF VIRGINIA	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a Value of	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	120,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	50,033.62
	1c. Copy line 63, Total of all property on Schedule A/B	\$	170,033.62
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	162,822.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	95,191.00
	Your total liabilities	\$	258,013.00
⊃ar	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,256.62
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,877.00
⊃ar	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 17-12857-BFK Doc 1 Entered 08/22/17 14:07:41 Desc Main Filed 08/22/17 Page 9 of 58 Case number (if known) Document

Debtor 1 Cynthia Michelle Mroz-Larsen

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,650.91

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port A on Cohodula F/F, come the following	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	33,797.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	33,797.00

	Case 1	.7-12057-6	SEK DOGI	_	eu 08/22/17 Entereu 08/2 cument Page 10 of 58	.2/17 14.0		J C3(o Main
ill	in this informa	tion to identify	your case and th						
Deb	otor 1	Cynthia Mic	helle Mroz-Lars	sen					
		First Name		e Name	Last Name				
	otor 2	First Name	N.C. al.alia	- N	LandManna				
(Spoi	use, if filing)	FIRST Name	Middle	e Name	Last Name				
Unit	ted States Bank	ruptcy Court for	the: EASTERN	DISTRI	CT OF VIRGINIA				
Cas	e number							_	Check if this is an amended filing
	ficial Forr chedule		_						12/15
					t only once. If an asset fits in more than on married people are filing together, both are				
nfor	mation. If more s	pace is needed,			his form. On the top of any additional page				
ınsw	ver every questio	n.							
Part	1: Describe Ea	ch Residence, B	uilding, Land, or Ot	her Real	Estate You Own or Have an Interest In				
. Do	o you own or hav	e any legal or eq	uitable interest in a	any resid	lence, building, land, or similar property?				
_				-	-				
	No. Go to Part 2.								
	Yes. Where is th	e property?							
				14/1	tia tha mananta 2 ay y a y				
1.1	2740 Marling	nton Rd		wna	t is the property? Check all that apply				
		vailable, or other des	scription		Single-family home				exemptions. Put s on Schedule D:
					Duplex or multi-unit building Condominium or cooperative				ured by Property.
					Condominant of cooperative				
					Manufactured or mobile home	Current valu	e of the	Curr	ent value of the
	Waterford	MI	48329-0000		Land	entire prope			ion you own?
	City	State	ZIP Code		' ' '	\$120	,000.00		\$120,000.00
									vnership interest
				_	has an interest in the property? Check one	(such as fee a life estate)		ancy b	y the entireties, or
						Joint tena	int		
	Oakland				Debtor 2 only				
	County				Debtor 1 and Debtor 2 only	Charle!	i Abia ia ac		
						- Cneck i	this is com	munit	
					At least one of the debtors and another	(see instru			y property

property identification number:

Official Form 106A/B Schedule A/B: Property page 1 Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 11 of 58 Case number (if known)

					
If you own or have m	nore than one, list h				
9560 Via Encinas			is the property? Check all that apply		
Street address, if available, or otl	her description		• •		laims or exemptions. Put ed claims on Schedule D:
			Duplex or multi-unit building		ims Secured by Property.
			Condominium or cooperative		
			Manufactured or mobile home	Current value of the	Current value of the
Orlando	FL 32830-0000		Land	entire property?	portion you own?
City	State ZIP Code		Investment property	Unknown	Unknow
			Timeshare	Describe the nature of	your ownership interest
			Other	(such as fee simple, te	nancy by the entireties,
		_	has an interest in the property? Check one	a life estate), if known. Joint tenant	
Orango			Debtor 1 only	Joint teriant	
Orange County			Debtor 2 only		
Oddiny		_	Debtor 1 and Debtor 2 only	☐ Check if this is con	mmunity property
		041	At least one of the debtors and another	(see instructions)	
			r information you wish to add about this iter erty identification number:	n, such as local	
			•		
			eational vehicles, other vehicles, and a		
<i>Examples:</i> Boats, trailers, m	lotors, personal watercra	att, tisnii	ng vessels, snowmobiles, motorcycle acc	essories	
No					
☐ Yes					
			our entries from Part 2, including any here		\$0.00
w 2. Deceribe Veur Bersene	al and Household Items				
rt 3: Describe Your Persona you own or have any leg		t in anv	of the following items?		Current value of the
, , ,		,	or une remember and remember an		
					portion you own? Do not deduct secured claims or exemptions.
Examples: Major appliance		a, kitche	enware		Do not deduct secure
Examples: Major appliance		a, kitche	enware		Do not deduct secured
□ No ■ Yes. Describe		a, kitche	enware		Do not deduct secure

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

Page 12 of 58

Case number (if known) Document Debtor 1 Cynthia Michelle Mroz-Larsen ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$250.00 Women's clothing Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... Unknown 2 Cats 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1.750.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes.....

Case 17-12857-BFK

Doc 1

Filed 08/22/17

Entered 08/22/17 14:07:41

		17.1.	Checking	PNC Bank xx0556	\$233.89
_		17.2.	Wallet Reserve	PNC Bank xx0556	\$0.01
		17.3.	Virtual Wallet Growth	PNC Bank xx0556	\$0.84
		17.4.	Checking	Chase xx3456	\$91.08
18.	■ No		ent accounts with broker	age firms, money market accounts	
	☐ Yes		Institution or issuer nam	ne:	
	joint venture ■ No		·	ed and unincorporated businesses, including an interest	∶in an LLC, partnership, and
	☐ Yes. Give specific info		about them me of entity:	% of ownership:	
	Negotiable instruments	include ents are	personal checks, cashier those you cannot transfe	ole and non-negotiable instruments 's' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
21.	Retirement or pension Examples: Interests in I □ No			b), thrift savings accounts, or other pension or profit-sharing p	olans
	Yes. List each accoun		tely. of account:	Institution name:	
		401(k)	Retirement	\$47,957.80
		d deposi	ts you have made so tha	nt you may continue service or use from a company lic utilities (electric, gas, water), telecommunications compani Institution name or individual:	ies, or others
23.	Annuities (A contract for	r a perio	dic payment of money to	you, either for life or for a number of years)	
	■ No □ Yes Iss	suer nam	ne and description.		
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), §			fied ABLE program, or under a qualified state tuition pro	gram.
	· · · ·	stitution	name and description. Se	eparately file the records of any interests.11 U.S.C. § 521(c):	
	■ No			r than anything listed in line 1), and rights or powers exe	rcisable for your benefit
		ademarl	s, trade secrets, and o	ther intellectual property	

■ No

De	ebtor 1	Cynthia Michelle Mroz-Larsen	Document	Page 14 of 58 Case number	er (if known)	
	☐ Yes.	Give specific information about them				
27.	Examp ■ No	es, franchises, and other general intangoles: Building permits, exclusive licenses, of Give specific information about them		n holdings, liquor licenses, profess	sional licenses	
M	oney or	property owed to you?			Current value of the portion you own? Do not deduct secun claims or exemption	red
28.	_	unds owed to you				
	■ No □ Yes.	Give specific information about them, inclu	uding whether you alre	ady filed the returns and the tax ye	ears	
29.	Examp ■ No	support oles: Past due or lump sum alimony, spous Give specific information	sal support, child suppo	ort, maintenance, divorce settleme	ent, property settlement	
30.	Examp ■ No	amounts someone owes you bles: Unpaid wages, disability insurance pa benefits; unpaid loans you made to so Give specific information	,	efits, sick pay, vacation pay, work	xers' compensation, Social Security	
31.	Interes	ts in insurance policies bles: Health, disability, or life insurance; he	ealth savings account (HSA); credit, homeowner's, or ren	ter's insurance	
	■ No	Name the insurance company of each pol				ıd
	■ No			Beneficiary:	Surrender or refun value:	ıd
32.	Any int If you a someo	Name the insurance company of each pol	icy and list its value.	Beneficiary:	Surrender or refun value:	d
	Any int If you a someo No Yes. Claims Examp	Name the insurance company of each pol Company name: serest in property that is due you from sere the beneficiary of a living trust, expect one has died.	icy and list its value. someone who has die proceeds from a life in but have filed a lawsui	Beneficiary: d surance policy, or are currently en t or made a demand for paymen	Surrender or refun value: ntitled to receive property because	d
	Any int If you a someo No Yes. Claims Examp	Name the insurance company of each policompany name: terest in property that is due you from same the beneficiary of a living trust, expectine has died. Give specific information	icy and list its value. someone who has die proceeds from a life in but have filed a lawsui	Beneficiary: d surance policy, or are currently en t or made a demand for paymen	Surrender or refun value: ntitled to receive property because	d
33.	Any int If you a someo No Yes. Claims Examp No Yes. Other c	Name the insurance company of each pole Company name: terest in property that is due you from same the beneficiary of a living trust, expecting has died. Give specific information against third parties, whether or not yourse. Accidents, employment disputes, insurance.	comeone who has die proceeds from a life in the proceed from a life in the proceeds from a life in the proceed from a life in the proceed from a life in the proceeds from a life in the proceed from a life	Beneficiary: d surance policy, or are currently en t or made a demand for paymen to sue	Surrender or refun value: ntitled to receive property because	d
33.	Any int If you a someo No Yes. Claims Examp No Yes. Other c	Name the insurance company of each pole Company name: terest in property that is due you from some the beneficiary of a living trust, expecting has died. Give specific information against third parties, whether or not you les: Accidents, employment disputes, insurance particular and provides and provides are the property of the provides and provides are the property of the provides and provides are the property that is due you from some provides and provides are the property that is due you from some provides and provides are the property that is due you from some provides and provides are the property that is due you from some provides are the property that is due you from some provides are the property that is due you from some provides are the provides are the property that is due you from some provides are the property that is due you from some provides are the property that is due you from some provides are the property of a living trust, expecting the provides are th	comeone who has die proceeds from a life in the proceed from a life in the proceeds from a life in the proceed from a life in the proceed from a life in the proceeds from a life in the proceed from a life	Beneficiary: d surance policy, or are currently en t or made a demand for paymen to sue	Surrender or refun value: ntitled to receive property because	d
33.	Any int If you a someo No Yes. Claims Examp No Yes. Other c No Yes. Any fin	Name the insurance company of each policompany name: terest in property that is due you from some the beneficiary of a living trust, expecting has died. Give specific information against third parties, whether or not you'les: Accidents, employment disputes, insurance contingent and unliquidated claims of expective each claim	comeone who has die proceeds from a life in the proceed from a life in the proceeds from a life in the proceed from a life in the proceed from a life in the proceeds from a life in the proceed from a life	Beneficiary: d surance policy, or are currently en t or made a demand for paymen to sue	Surrender or refun value: ntitled to receive property because	d
33. 34.	Any int If you a someo No Yes. Claims Examp No Yes. Other c No Yes. Any fin Yes.	Name the insurance company of each pole Company name: Rerest in property that is due you from some the beneficiary of a living trust, expecting has died. Give specific information against third parties, whether or not yourse. Accidents, employment disputes, insurance contingent and unliquidated claims of expective each claim	comeone who has die proceeds from a life in the proceed from a life in the proceeds from a life in the proceeds from a life in the proceeds from a life in the proceed from a life in the proceeds from a life in the proceed from a	d surance policy, or are currently en tor made a demand for payment to sue	Surrender or refunvalue: Intitled to receive property because Int Int Int Int Int Int Int In	
33. 34. 35.	Any int If you a someo No Yes. Claims Examp No Yes. Other o No Yes. Any fin No Yes. And the for Pa	Name the insurance company of each pole Company name: terest in property that is due you from some the beneficiary of a living trust, expectine has died. Give specific information against third parties, whether or not yourses: Accidents, employment disputes, insurance and unliquidated claims of expective each claim contingent and unliquidated claims of expective each claim	comeone who has die proceeds from a life in bu have filed a lawsui urance claims, or rights overy nature, including an empart 4, includin	d surance policy, or are currently en tor made a demand for payment to sue	Surrender or refunvalue: Intitled to receive property because Int Int Int Int Int Int Int In	
33. 34. 35.	Any int If you a someo No Yes. Claims Examp No Yes. Other o No Yes. Any fin No Yes.	Name the insurance company of each pole Company name: Rerest in property that is due you from some the beneficiary of a living trust, expecting has died. Give specific information against third parties, whether or not yours: Accidents, employment disputes, insurance and unliquidated claims of expectible each claim contingent and unliquidated claims of expectible each claim ancial assets you did not already list Give specific information the dollar value of all of your entries from t	comeone who has die proceeds from a life in but have filed a lawsuit urance claims, or rights every nature, including an every nature an Interest I	d surance policy, or are currently en t or made a demand for payment to sue g counterclaims of the debtor are currently en to sue	Surrender or refunvalue: Intitled to receive property because Int Int Int Int Int Int Int In	

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 15 of 58

Case number (if known)

Debtor 1 Cynthia Michelle Mroz-Larsen

Par	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46.	Do you own or have any legal or equitable interest in any farm-	or commercial fishin	q-related property?	
	■ No. Go to Part 7.		J	
	☐ Yes. Go to line 47.			
Par	7: Describe All Property You Own or Have an Interest in That You	Did Not List Above		
_	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No	?		
	Yes. Give specific information			
			1	
54.	Add the dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
	<u></u>		l	
Par	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$120,000.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$1,750.00		
58.	Part 4: Total financial assets, line 36	\$48,283.62		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$50,033.62	Copy personal property to	otal \$50,033.62
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$170,033.62

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1	Cynthia Michelle	Mroz-Larsen		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number				
(if known)				Check if this is an amended filing

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

				100% of fair market value, up to any applicable statutory limit	
	401(k): Retirement Line from Schedule A/B: 21.1	\$47,957.80		\$47,957.80	Mich. Comp. Laws § 600.5451(1)(k)
				100% of fair market value, up to any applicable statutory limit	The second secon
	Checking: PNC Bank xx0556	\$233.89		\$233.89	Mich. Comp. Laws § 600.5451(1)(m)
				100% of fair market value, up to any applicable statutory limit	,
	Women's clothing Line from Schedule A/B: 11.1	\$250.00		\$250.00	Mich. Comp. Laws § 600.5451(1)(a)(iii)
				100% of fair market value, up to any applicable statutory limit	(X)
	General Furniture Line from Schedule A/B: 6.1	\$1,500.00		\$1,500.00	Mich. Comp. Laws § 600.5451(1)(c)
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
2.	For any property you list on Schedule A/E	that you claim as exe	empt,	fill in the information below.	
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
	9				

Official Form 106C

No

Yes

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Page 17 of 58
Case number (if known) Document

Debtor 1 Cynthia Michelle Mroz-Larsen

			Document	Page 18	8 OT 58		
Filli	in this informatio	n to identify you	r case:				
Deb	tor 1 C	ynthia Michell	e Mroz-Larsen				
		rst Name	Middle Name	Last Name		-	
	tor 2	rst Name	Middle Name	Last Name			
(Spoo	use if, filing) Fi	ist Name	Middle Name	Lastivanie			
Unit	ed States Bankrup	otcy Court for the:	EASTERN DISTRICT OF VIRGI	NIA			
Case (if kno	e number					_	if this is an
							aca ming
Offi	icial Form 10	<u> </u>					
Sc	hedule D:	Creditors	Who Have Claims S	Secure	d by Propert	У	12/15
s nee numb	eded, copy the Add per (if known). any creditors have	itional Page, fill it o	If two married people are filing togethe out, number the entries, and attach it to your property?	o this form. O	On the top of any addition	nal pages, write your na	
	■ Yes. Fill in all o		ŕ	oricadico. 1	od nave nothing clock		
			pelow.				
Part		cured Claims			Column A	Column B	Column C
for ea	ach claim. If more th	nan one creditor has	nore than one secured claim, list the cred a particular claim, list the other creditors cal order according to the creditor's name	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Ocwen Loan S	Servicing,	Describe the property that secures the	ne claim:	\$12,792.00	\$120,000.00	\$12,792.00
	Creditor's Name Attn:		2740 Marlington Rd Waterfor 48329 Oakland County				
	Research/Ban		As of the date you file, the claim is: C	heck all that			
	1661 Worthing	gton Ra Ste	apply.	TICOR UII III II			
	West Palm Bo	h, FL 33409	☐ Contingent				
	Number, Street, City,	State & Zip Code	☐ Unliquidated ☐ Disputed				
_	o owes the debt?	Check one.	Nature of lien. Check all that apply.				
_	ebtor 1 only Debtor 2 only			ortgage or se	ecured		
_	Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mech	hanic's lien)			
■ A	at least one of the de	btors and another	☐ Judgment lien from a lawsuit				
	Check if this claim recommunity debt	elates to a	Other (including a right to offset)				
Date	edebt was incurred	Opened 5/20/04 Last Active 3/23/17	Last 4 digits of account number	er <u>0684</u>			
2.2	Seterus Inc		Describe the property that secures the	o claim:	\$132,546.00	\$120,000.00	\$12,546.00
2.2	Creditor's Name		2740 Marlington Rd Waterfor		φ132,340.00	\$120,000.00	\$12,540.00
			48329 Oakland County	<u></u>			
	14523 Sw Mill Beavertton, O		As of the date you file, the claim is: Capply. Contingent	heck all that			
	Number, Street, City,	State & Zip Code	☐ Unliquidated				
		a	Disputed				
_	o owes the debt? (check one.	Nature of lien. Check all that apply.	outas	anura d		
	ebtor 1 only bebtor 2 only		An agreement you made (such as m car loan)	iortgage or se	ecurea		
_	Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mech	hanic's lien)			
_	at least one of the de	•	☐ Judgment lien from a lawsuit	- /			

Official Form 106D

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 19 of 58

Debtor 1 Cynthia Michelle Mroz-L First Name Middle N		ase number (if know)		
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 06/13 Last Active 4/07/17	Last 4 digits of account number			
2.3 Sst/suntrust	Describe the property that secures the claim:	\$17,484.00	\$120,000.00	\$17,484.00
Creditor's Name	2740 Marlington Rd Waterford, MI 48329 Oakland County			
4315 Pickett Rd Saint Joseph, MO 64503	As of the date you file, the claim is: Check all that apply. ☐ Contingent			
Number, Street, City, State & Zip Code Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or secucar loan)	red		
☐ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 07/15 Last Active 4/12/17	Last 4 digits of account number 5506			
2.4 Wyndham Vacation Resorts	Describe the property that secures the claim:	Unknown	Unknown	Unknown
Creditor's Name	9560 Via Encinas Orlando, FL 32830 Orange County			
6277 Sea Harbor Drive Orlando, FL 32821	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secu car loan)	red		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
-	olumn A on this page. Write that number here:	\$162,822.00		
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$162,822.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 17-12037-DIR DUC 1	Document Page 2	0 of 50	Desc Main
Fill in t	this information to identify your case:	DOLUMENT PAUE 2	JUL JA	
Debtor	1 Cynthia Michelle Mroz-Lars	sen		
20210.		e Name Last Name		
Debtor (Spouse i		e Name Last Name		
United	States Bankruptcy Court for the: EASTER	N DISTRICT OF VIRGINIA		
Case n		_		Check if this is an amended filing
	al Form 106E/F dule E/F: Creditors Who Hav	ve Unsecured Claims		12/15
any exec Schedul Schedul eft. Atta	omplete and accurate as possible. Use Part 1 for cutory contracts or unexpired leases that could re G: Executory Contracts and Unexpired Leases e D: Creditors Who Have Claims Secured by Proch the Continuation Page to this page. If you have decase number (if known).	esult in a claim. Also list executory of (Official Form 106G). Do not include perty. If more space is needed, copy we no information to report in a Part,	ontracts on Schedule A/B: Property (Cany creditors with partially secured cluber Part you need, fill it out, number the	Official Form 106A/B) and on aims that are listed in e entries in the boxes on the
Part 1:				
_	any creditors have priority unsecured claims aga	ainst you?		
	No. Go to Part 2.			
	Yes.			
Part 2:	List All of Your NONPRIORITY Unsecur	ed Claims		
	any creditors have nonpriority unsecured claims No. You have nothing to report in this part. Submit th Yes.	-	edules.	
4. List	t all of your nonpriority unsecured claims in the a ecured claim, list the creditor separately for each cla n one creditor holds a particular claim, list the other of	im. For each claim listed, identify what	ype of claim it is. Do not list claims alread	dy included in Part 1. If more
				Total claim
4.1	Amex Nonpriority Creditor's Name	Last 4 digits of account number	1253	\$1,811.00
	Correspondence Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 02/17 Last Active 7/20/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did	not
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	<u> </u>	

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 21 of 58 Debtor 1 Cynthia Michelle Mroz-Larsen Case number (if know) 4.2 \$18,470.00 At&T Universal Citi Card Last 4 digits of account number 0444 Nonpriority Creditor's Name Opened 12/01 Last Active Po Box 6500 When was the debt incurred? 7/31/17 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.3 Citibank/The Home Depot Last 4 digits of account number 2095 \$2,510.00 Nonpriority Creditor's Name Opened 11/14 Last Active Citicorp Cr Srvs/Centralized **Bankruptcy** When was the debt incurred? 7/24/17 Po Box 790040 S Louis, MO 63129 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.4 \$4,609.00 Citicards Cbna Last 4 digits of account number 6129 Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Opened 04/03 Last Active **Bankrupt** When was the debt incurred? 7/14/17 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

☐ Yes

■ No

debt

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Credit Card

Type of NONPRIORITY unsecured claim:

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

☐ Disputed

☐ Student loans

report as priority claims

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

☐ Check if this claim is for a community

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 22 of 58 Case number (if know) Debtor 1 Cynthia Michelle Mroz-Larsen 4.5 \$4,694.00 **Comenity Bank** Last 4 digits of account number 0179 Nonpriority Creditor's Name Opened 06/17 Last Active Po Box 182125 When was the debt incurred? 7/31/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.6 **Comenity Bank** Last 4 digits of account number \$5,400.00 Nonpriority Creditor's Name Po Box 182125 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Paypal Other, Specify 4.7 **Discover Financial Services** Last 4 digits of account number Unknown Nonpriority Creditor's Name P.O. Box 30943 When was the debt incurred? Salt Lake City, UT 84130-0943 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only Disputed

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset? ■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 \square Debts to pension or profit-sharing plans, and other similar debts Other. Specify

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 23 of 58

Debto	or 1 Cynthia Michelle Mroz-Larsen		Case number (if know)	
4.8	Equitableacc	Last 4 digits of account number	0549	\$1,224.00
	Nonpriority Creditor's Name 1200 Ford Road Minnetonka, MN 55305	When was the debt incurred?	Opened 8/30/16 Last Active 4/15/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.9	Fed Loan Serv	Last 4 digits of account number	0002	\$33,797.00
	Nonpriority Creditor's Name Pob 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 09/16 Last Active 7/17/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	<u>l</u>	
4.1 0	Kohls/Capital One	Last 4 digits of account number	7666	\$1,857.00
	Nonpriority Creditor's Name Kohls Credit Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 03/06 Last Active 7/17/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	

Official Form 106 E/F

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 24 of 58

Cynthia Michelle Mroz-Larsen		Case number (if know)	
Prosper Marketplace Inc	Last 4 digits of account number	1777	\$17,307.00
Nonpriority Creditor's Name Po Box 396081 San Francisco, CA 94139	When was the debt incurred?	Opened 06/16 Last Active 7/24/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated☐ Disputed		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Unsecured		
Prosper Marketplace Inc Nonpriority Creditor's Name	Last 4 digits of account number	5418	\$2,024.00
Po Box 396081 San Francisco, CA 94139	When was the debt incurred?	Opened 10/14 Last Active 7/28/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Unsecured		
Synchrony Financial Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
PO Box 960061 Orlando, FL 32896	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	■ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify CareCredit		

Debtor 1 Cynthia Michelle Mroz-Larsen _____ Page 25 of 58 Case number (if know)

US Bank/Rms CC	Last 4 digits of account number	7232	\$1,488.00
Nonpriority Creditor's Name	_		
Card Member Services		Opened 03/07 Last Active	
Po Box 108	When was the debt incurred?	7/11/17	
St Louis, MO 63166	_		
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	-	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other. Specify Credit Card		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
Total	6f.	Student loans	6f.	\$	Total Claim 33,797.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	61,394.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	95,191.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor				
Debtor 1	Cynthia Michelle	Mroz-Larsen		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Volkswagen Credit PO Box 3 Hillsboro, OR 97123-0003

		Document	Page 27 of 58	
Fill in thi	s information to identify your	case:		
Debtor 1	Cynthia Michelle	Mroz-Larson		
DODIOI I	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, fi	ling) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT OF VIR	GINIA	
Case nun	nher			
(if known)				☐ Check if this is an
				amended filing
Officia	al Form 106H			
		1.4		
sched	dule H: Your Cod	ebtors		12/15
eople ard ill it out, a our name	e filing together, both are equ and number the entries in the e and case number (if known)	ally responsible for supplying boxes on the left. Attach the A. Answer every question.		is needed, copy the Additional Page, e top of any Additional Pages, write
			·	
□ No ■ Ye				
■ Ye	es .			
Arizo	na, California, Idaho, Louisiana,		y state or territory? (Community pro- cico, Texas, Washington, and Wiscon	
`	o. Go to line 3.	and a selection of the		
⊔ Ye	s. Dia your spouse, former spou	use, or legal equivalent live with	you at the time?	
in lin Form	e 2 again as a codebtor only i 1 106D), Schedule E/F (Official Column 2.	f that person is a guarantor or	cosigner. Make sure you have list (Official Form 106G). Use Schedul	filing with you. List the person shown ed the creditor on Schedule D (Official e D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		e creditor to whom you owe the debt edules that apply:
3.1	Michael Larsen 2121 Willhite Rd		Schedule	
	Waterford, MI 48327			E/F, line
			☐ Schedule	
			Ocwen Loar	n Servicing, Llc
3.2	Michael Larsen			D, line 2.2
	2121 Willhite Rd Waterford, MI 48327			E/F, line
	Wateriora, im 40327		☐ Schedule	G
			Seterus Inc	
2.2	Michael Larger			
3.3	Michael Larsen 2121 Willhite Rd			D, line 2.3
	Waterford, MI 48327			E/F, line
			☐ Schedule	
			Sst/suntrust	

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 28 of 58

Eill	in this information to identify your c	200:				I			
	, , , , , , , , , , , , , , , , , , ,	helle Mroz-Larsen							
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF VIRGINIA						
Of Se assup	fficial Form 1061 chedule I: Your Income somplete and accurate as possiblying correct information. If your	sible. If two married peo are married and not fili	ng jointly, and your sp	ouse	is liv	An As 13 MM	Income a I / DD/ Y or 2), bottou, inclu	nt showing as of the fo	ation about your
atta	use. If you are separated and you ch a separate sheet to this form. t 1: Describe Employment								
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fil	ing spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed Finance Specialist Volkswagen Group of America				☐ Employed ☐ Not employed		
	employers. Include part-time, seasonal, or self-employed work.	Occupation Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address	2200 Ferdinand F Herndon, VA 201		ne D	r			
		How long employed to	here? 3 years				_		
Esti spou	mate monthly income as of the duse unless you are separated. u or your non-filing spouse have me space, attach a separate sheet to	ate you file this form. If	,		,	•	•	•	, ,
.1016	o opaso, allaon a soparato sneet to	and form.				For Debt	or 1	For Deb	otor 2 or ng spouse
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	7,€	550.91	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A

7,650.91

N/A

Calculate gross Income. Add line 2 + line 3.

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 29 of 58

Debt	or 1	Cynthia Michelle Mroz-Larsen	<u> </u>	Case	number (if known)			
				For	Debtor 1	For [Debtor 2 or	
			_				filing spouse	
	Cop	by line 4 here	4.	\$_	7,650.91	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	2,334.80	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	382.55	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	170.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify: 401k Loan	5h.+	· ·	199.53		N/A	
		Auto Lease 1	_	\$_	281.41	\$	N/A	
		Auto Lease 2	_	\$_ \$	249.10	\$	N/A	
		Auto Lease 3 HSA		\$ 	237.79 26.00	\$ 	N/A N/A	
				· —		· —		
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	3,881.18	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,769.73	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				•		
	٠.	monthly net income.	8a.	\$_	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify: Payment from Children for Cars	_ 8h.+	\$	486.89	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	486.89	\$	N/A	<u>.</u>
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$,	4,256.62 + \$_		N/A = \$	4,256.62
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•		chedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$ Combin	4,256.62
13.	Do j	you expect an increase or decrease within the year after you file this form? No.	?					income
		Yes. Explain:						

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 30 of 58

	in this informati	'and a 'dead' and									
FIII	in this informat	tion to identify yo	our case:								
Deb	tor 1	Cynthia Mich	nelle Mro	Check if this is:							
Deh	tor 2							n amended filing	ving postpetition char	nter	
	ouse, if filing)					A supplement showing postpetition chapter 13 expenses as of the following date:					
Linit	ed States Bankri	intey Court for the	· FASTE	RN DISTRICT OF VIRGIN	ΙΙΔ		M	IM / DD / YYYY			
	ed States Darikit	uptcy Court for the	. <u>LAOTE</u>	THE PROPERTY OF VINCOIN			10	WI / DD / 1111			
l	e number nown)										
O	fficial Fo	rm 106J									
S	chedule	J: Your	Exper	ises						12/15	
info	ormation. If me		eded, atta	. If two married people and the control of the cont							
Par		ibe Your House	hold								
1.	Is this a join	t case?									
	No. Go to										
	☐ Yes. Doe s	s Debtor 2 live i	in a separ	ate household?							
	□ No		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of D	ebto	r 2.			
2.	Do you have	dependents?	■ No								
۷.	•	•	_		D			Daman dandia	Dana damandant		
	Do not list De Debtor 2.	eptor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		_	Dependent's age	Does dependent live with you?		
	Do not state	the							□ No		
	dependents r	names.							☐ Yes		
									☐ No		
									☐ Yes		
									□ No		
									☐ Yes		
									☐ No		
_	_								☐ Yes		
3.	expenses of yourself and	enses include people other the your depende	han nts? □	No Yes							
		ate Your Ongoi penses as of vo		ly Expenses uptcy filing date unless y	ou are using this fo	orm as a	suni	nlement in a Cha	nter 13 case to rend	ort	
exp				y is filed. If this is a supp							
				government assistance i							
	ficial Form 10		a nave inc	indea it on ocheane i.	rour moome		_	Your expe	enses		
4.		r home owners d any rent for the		ses for your residence. I	nclude first mortgage	e 4.	\$		1,395.00		
	If not include	ed in line 4:									
	4a. Real e	state taxes				4a.	\$		0.00		
		ty, homeowner's	s, or renter	's insurance		4b.	- 1		35.00		
	•	•		ıpkeep expenses		4c.	\$		0.00		
		owner's associat				4d.	\$		0.00		
5.	Additional m	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00		

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 31 of 58

Deptor 1	Cynthia Michelle Mroz-Larsen	Case num	ber (if known)	
6. Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	40.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	132.00
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	— 7.	· —	500.00
	dcare and children's education costs	8.	\$	0.00
	ning, laundry, and dry cleaning	9.	\$	150.00
	onal care products and services	10.	·	150.00
	ical and dental expenses	11.	· :	300.00
	sportation. Include gas, maintenance, bus or train fare.	11.	Ψ	300.00
	ot include car payments.	12.	\$	150.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	itable contributions and religious donations	14.		0.00
15. Ins ui	<u> </u>	17.	Ψ	
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.		0.00
	Other insurance. Specify:	15d.	· ·	0.00
	ss. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
Spec		16.	\$	0.00
	illment or lease payments:			
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	· · ·	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d. 17d.	· -	0.00
	payments of alimony, maintenance, and support that you did not report as	17u.	Ψ	0.00
	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19. Othe	r payments you make to support others who do not live with you.		\$	0.00
Spec		19.	<u> </u>	
	er real property expenses not included in lines 4 or 5 of this form or on Sche		our Income.	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	· ·	0.00
	Maintenance, repair, and upkeep expenses	20d.	· ·	0.00
	Homeowner's association or condominium dues	20a.	·	0.00
			· -	
i. Otne	r: Specify: Pet Expenses		+\$	25.00
22. Calc i	ulate your monthly expenses			
	Add lines 4 through 21.		\$	2,877.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	2,877.00
220.	The mile ZZa and ZZb. The result is your monthly expenses.		Ψ	2,011.00
23. Calc	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,256.62
	Copy your monthly expenses from line 22c above.	23b.	-\$	2,877.00
	• • • • • • • • • • • • • • • • • • • •			
23c.	Subtract your monthly expenses from your monthly income.			4
	The result is your monthly net income.	23c.	\$	1,379.62
	, ,			
	ou expect an increase or decrease in your expenses within the year after yo			
	xample, do you expect to finish paying for your car loan within the year or do you expect your	mortgage	payment to increase	or decrease because of a
_	ication to the terms of your mortgage?			
■ No				
ПУ	Explain here:			

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 32 of 58

Fill in this infer	emotion to identify your				
	rmation to identify your				
Debtor 1	Cynthia Michelle First Name	Mroz-Larsen Middle Name	Last Name		
Debtor 2	ristrano	Wildale Harrie	Edocitanio		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT	OF VIRGINIA		
Case number					
(if known)					☐ Check if this is an amended filing
Official For	_{m 106Dec} tion About a	an Individua	l Dobtoric S	obodulos	
Declara	Hon About a	ili iliuiviuua	i Depioi 3 3	ciledules	12/15
	Í8 U.Ś.C. §§ 152, 1341, 1 gn Below	l519, and 3571.			
Did you pa	ay or agree to pay some	one who is NOT an atto	orney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sur	nmary and schedules fi	led with this declaration	on and
X /s/ Cvi	nthia Michelle Mroz-L	arsen	X		
Cynth	ia Michelle Mroz-Lars ure of Debtor 1		Signature o	of Debtor 2	
Date	August 17, 2017		Date		

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 33 of 58

EIII	in this inform	nation to identify you	r case:							
Del	otor 1	Cynthia Michelle	Mroz-Larsen Middle Name	Last Name						
Del	otor 2	i iist waine	Wildle Name	Last Name						
(Spc	ouse if, filing)	First Name	Middle Name	Last Name						
Uni	ted States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA						
Cas	se number									
(if kr	nown)				-	Check if this is an				
						amended filing				
∩f	ficial Fo	rm 107								
			Affairs for Indivic	luals Filing for B	ankruntov	4/10				
					equally responsible for sup					
		ore space is needed, a). Answer every que		this form. On the top of an	y additional pages, write yo	ur name and case				
	<u> </u>	,	rital Status and Where You	Lived Refore						
	•			Lived Belole						
1.	What is your	current marital statu	is?							
	☐ Married									
	Not mar	ried								
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?						
	□ No									
	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pri	ior Address:	Dates Debtor 1	Debtor 2 Prior Ac	Idress:	Dates Debtor 2				
			lived there	_		lived there				
	2740 Marli Waterford,		From-To: 1/95-12/16	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:				
3.	Within the la	st 8 vears, did vou e	er live with a spouse or leg	ial equivalent in a commur	ity property state or territor	v? (Community property				
					ico, Texas, Washington and V					
	■ No									
	☐ Yes. Ma	ike sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ficial Form 106H).						
Par	t 2 Explai	n the Sources of You	r Income							
· u	Ехріан		- moonic							
4.			nployment or from operatin u received from all jobs and a		ear or the two previous cale -time activities.	ndar years?				
			have income that you receive							
	□ No									
	Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income	Gross income	Sources of income	Gross income				
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
Fro	om January 1	of current year until	=	\$55,361.97	□ Wagos commissions	2112. 33.3.13)				
		d for bankruptcy:	■ Wages, commissions, bonuses, tips	φυυ,υυ1.97	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					
			-1 3							

Official Form 107

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Page 34 of 58 Case number (if known) Document

Debtor 1 Cynthia Michelle Mroz-Larsen

				Debtor 1					Debtor 2		
				Sources	of income that apply.	(befo	ss income ore deductions usions)	s and	Sources of inco		Gross income (before deductions and exclusions)
	r last calenda anuary 1 to De		31, 2016)	■ Wages bonuses,	s, commissions, tips		\$76,86	68.00	☐ Wages, commissions, bonuses, tips		
				☐ Operat	ing a business				☐ Operating a l	ousiness	
	r the calendar anuary 1 to De			■ Wages bonuses,	s, commissions, tips		;	\$0.00	☐ Wages, combonuses, tips	missions,	
				☐ Operat	ing a business				☐ Operating a l	ousiness	
	winnings. If y List each sou	ou are filir	ng a joint cas	e and you h	nave income, men	ou rece	eived together	, list it on	lly once under De	btor 1.	d gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe b		eacl (befo	ss income from the source ore deductions usions)		Sources of incontrol Describe below.	ome	Gross income (before deductions and exclusions)
Pa	rt 3: List Ce	ertain Pay	ments You	Made Befo	re You Filed for I	Bankru	ıptcy				
3.	No.	either De dividual p uring the s No. Yes	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include	personal, fare you filed .each creditor. Do n payments to	amily, or househol for bankruptcy, di r to whom you pai	d purpo d you p d a tota its for d nis banl	ebts. Consum ose." ay any credito al of \$6,425* o lomestic suppi kruptcy case.	or a total r more in ort obliga	of \$6,425* or mor one or more pay tions, such as ch	e? ments and tl ld support a	1(8) as "incurred by ar ne total amount you nd alimony. Also, do
	Yes. D	ebtor 1 o	r Debtor 2 o 90 days befo Go to line 7 List below 6	r both have re you filed . each credito ments for d	e primarily consu for bankruptcy, di r to whom you pai omestic support of	mer de d you p d a tota	ebts. pay any credito al of \$600 or m	or a total	of \$600 or more?	ou paid that	
	Creditor's N	lame and	Address		Dates of payme	nt	Total amo	ount oaid	Amount you still owe	Was this p	payment for

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Page 35 of 58 Document ase number (*if known*) Debtor 1 Cynthia Michelle Mroz-Larsen Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Total amount Amount you Reason for this payment Dates of payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. ☐ Yes. Fill in the information below **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave per person the gifts

Official Form 107

Address:

Person to Whom You Gave the Gift and

Page 36 of 58 Case number (if known) Document Cynthia Michelle Mroz-Larsen Debtor 1 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Value Describe what you contributed Dates you contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 8/17/2017 \$500.00 Woehrle Dahlberg Jones Yao PLLC **Attorney Fees** 10615 Judicial Dr Suite 102 Fairfax, VA 22030 jhuang@lawfirmvirginia.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☐ No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made **Equitableacc** Unknown 1200 Ford Road Minnetonka, MN 55305 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you

Case 17-12857-BFK

Doc 1

Filed 08/22/17

Entered 08/22/17 14:07:41 Desc Main

Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Case 17-12857-BFK Doc 1 Page 37 of 58
Case number (if known) Document

Debtor 1 Cynthia Michelle Mroz-Larsen

19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prote-		y property to a	self-settle	d trust or similar device	of which you	are a		
	No Yes. Fill in the details.								
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Trans	fer was		
Do	w O. List of Contain Financial Associate Institute	lwiimanta Safa Danaait	Daves and Ca	arana Unit	-				
Pa	rt 8: List of Certain Financial Accounts, Inst	truments, Sare Deposit	Boxes, and St	orage Unit	is				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage								
	houses, pension funds, cooperatives, associ				-,,,,	, a, a			
	☐ Yes. Fill in the details.								
		Last 4 digits of account number	Type of acco	unt or Date account was closed, sold, moved, or transferred		before clo	balance osing or transfer		
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, a	ny safe de _l	posit box or other depos	itory for secu	ırities,		
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code)			Describe the contents		Do you s have it?	still		
22.	Have you stored property in a storage unit or	place other than your	home within 1	year before	re you filed for bankrupto	;y?			
	No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has c to it? Address (Number State and ZIP Code)					Do you s have it?	itill		
Pa	rt 9: Identify Property You Hold or Control fo	or Someone Else							
23.			ude any proper	ty you bor	rowed from, are storing f	or, or hold in	trust		
	■ No								
	Yes. Fill in the details.	M/II ! . (I		D	the amount of		V-1		
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value		
Pa	rt 10: Give Details About Environmental Infor	rmation							
For	r the purpose of Part 10, the following definitions apply:								
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	as defined under any e		law, wheth	er you now own, operate	, or utilize it	or used		
	Hazardous material means anything an envir		as a hazardous	waste, ha	zardous substance, toxid	: substance,			

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Page 38 of 58
Case number (if known) Document

Debtor 1 Cynthia Michelle Mroz-Larsen

24.	■ No	governmental unit notified you that Fill in the details.	t you may be liable or potentially liab	le und	ler or in viol	ation of an environme	ental law?			
	Name of		Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environment know it	ntal law, if you	Date of notice			
25.	■ No	, -	any release of hazardous material?							
	Name of	Fill in the details. site (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environme know it	ntal law, if you	Date of notice			
26.	■ No	been a party in any judicial or adn	ninistrative proceeding under any en	vironr	nental law?	Include settlements a	nd orders.			
	Case Titl Case Nu		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the c	ase	Status of the case			
Par	11: Giv	e Details About Your Business or	Connections to Any Business							
27.	Within 4 y	years before you filed for bankrupt	cy, did you own a business or have a	any of	the following	ng connections to any	business?			
	ПΑ	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	ПΑ	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	ПΑ	partner in a partnership								
	ПΑ	n officer, director, or managing ex	ecutive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation									
	□ No. None of the above applies. Go to Part 12.									
	Yes.	Yes. Check all that apply above and fill in the details below for each business.								
	Address		Describe the nature of the business Name of accountant or bookkeeper		Employer Do not inc	number or ITIN.				
	, ,	, .,	Name of accountant of bookkeeper		Dates business existed					
	CM Global Concepts LLC 2740 Marlington Rd Waterford, MI 48329		Online Sales		EIN: From-To	81-4536887 11/2016-02/2017				
	waterro	ora, IVII 40329				11/2010-02/2017				
	218 Cec	imited Concepts LLC lar Lane SE, Apt 55	Sales of Legal Insurance		EIN:	81-5381828				
	Vienna,	VA 22180			From-To	2/2017-Present				
28.		years before you filed for bankrupt ns, creditors, or other parties.	cy, did you give a financial statemen	t to ar	nyone about	your business? Inclu	de all financial			
	■ No									
		Fill in the details below.								
	Name Address (Number, S	treet, City, State and ZIP Code)	Date Issued							
Par	12 Sig	n Relow								

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Page 39 of 58
Case number (if known) Document

Debtor 1 Cynthia Michelle Mroz-Larsen

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Cynth	nthia Michelle Mroz nia Michelle Mroz-L ture of Debtor 1		
Date	August 17, 2017	Date	
Did you ■ No	u attach additional pa	ges to Your Statement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
☐ Yes			
Did you	ı pay or agree to pay	someone who is not an attorney to help you fill out bankruptcy	forms?
No			
☐ Yes.	Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and	nd Signature (Official Form 119).

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 40 of 58 United States Bankruptcy Court

Eastern District of Virginia

In re	Cynthia Michelle Mroz-Larsen		Case No.	
		Debtor(s)	Chapter	13
		Deotor(s)	Chapter	

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and the compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 4,100.00
	Prior to the filing of this statement I have received \$ 500.00
	Balance Due \$ 3,600.00
2.	The source of the compensation paid to me was:
	■ Debtor □ Other (specify)
3.	The source of compensation to be paid to me is:
	■ Debtor □ Other (specify)
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Other provisions as needed: Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following services: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 41 of 58 CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

August 17, 2017	/s/ Jeremy Huang
Date	Jeremy Huang
	Signature of Attorney
	Woehrle Dahlberg Jones Yao PLLC

Name of Law Firm 10615 Judicial Dr Suite 102 Fairfax, VA 22030

7037550214 Fax: 5712850065

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,100 (For all Cases Filed on or after 01/01/2016)

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED **STATES TRUSTEE** PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND **CLERK'S CM/ECF POLICY 9**

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

August 17, 2017	/s/ Jeremy Huang
Date	Jeremy Huang
	Signature of Attorney

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 42 of 58

Fill in this information to identify your case:						
Debtor 1	Cynthia Michelle Mroz-Larsen					
Debtor 2 (Spouse, if filing)						
United States B	United States Bankruptcy Court for the: Eastern District of Virginia					
Case number (if known)						

Check	Check as directed in lines 17 and 21:								
1	According to the calculations required by this Statement:								
1. Disposable income is not determined und 11 U.S.C. § 1325(b)(3).									
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

			•					
	Pari	11: Calculate Your Average Monthly Income						
	1.	What is your marital and filing status? Check one	only.					
		■ Not married. Fill out Column A, lines 2-11.						
		☐ Married. Fill out both Columns A and B, lines 2-11						
	10 th	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6- tie 6 months, add the income for all 6 months and divide the toto couses own the same rental property, put the income from that	month per al by 6. Fil	iod would I in the re	d be March 1 throussult. Do not includ	igh August 31. If the am le any income amount n	ount of your monthly incom nore than once. For examp	e varied during le, if both
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissi	ons (before all	\$ 7,650.91	\$	
	3.	Alimony and maintenance payments. Do not include Column B is filled in.	le payme	nts from	a spouse if	\$	\$	
	4.	All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	rt. Include old, your c spouse o	e regula depende	r contributions ents, parents,	\$0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debtor	1				
l		Gross receipts (before all deductions)	\$	0.00	-			
l		Ordinary and necessary operating expenses	- \$	0.00	-			
l		Net monthly income from a business, profession, or fa	arm \$	0.00	Copy here ->	\$	\$	
l	6.	Net income from rental and other real property	Debtor					
		Gross receipts (before all deductions)	\$_	0.00				
		Ordinary and necessary operating expenses	- \$	0.00				
ı		Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$ 0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 43 of 58

Cynthia Michelle Mroz-Larsen Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 7.650.91 \$ 7,650.91 each column. Then add the total for Column A to the total for Column B. Total average monthly income **Determine How to Measure Your Deductions from Income** Part 2: 12. Copy your total average monthly income from line 11. 7,650.91 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 7,650.91 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 7,650.91 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12

15b. The result is your current monthly income for the year for this part of the form.

91,810.92

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 44 of 58

Cynthia Michelle Mroz-Larsen Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: VA 16a. Fill in the state in which you live. 16b. Fill in the number of people in your household. 1 16c. Fill in the median family income for your state and size of household. 56.456.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 7.650.91 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 7,650.91 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 7,650.91 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 91,810.92 20b. The result is your current monthly income for the year for this part of the form 56,456.00 20c. Copy the median family income for your state and size of household from line 16c \$ 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Cynthia Michelle Mroz-Larsen **Cynthia Michelle Mroz-Larsen** Signature of Debtor 1 Date August 17, 2017 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 45 of 58

Fill in this information to identify your case:	
Debtor 1 Cynthia Michelle Mroz-Larsen	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Eastern District of Virginia	
Case number(if known)	☐ Check if this is an amended filing
Official Form 122C-2 Chapter 13 Calculation of Your Disposable I	ncome 04/10
To fill out this form, you will need your completed copy of <i>Chapter 13 Stateme</i> Commitment Period (Official Form 122C-1).	ent of Your Current Monthly Income and Calculation of
Be as complete and accurate as possible. If two married people are filing toge space is needed, attach a separate sheet to this form, Include the line number additional pages, write your name and case number (if known).	
Part 1: Calculate Your Deductions from Your Income	
The Internal Revenue Service (IRS) issues National and Local Standards for the questions in lines 6-15. To find the IRS standards, go online using the information may also be available at the bankruptcy clerk's office.	
Deduct the expense amounts set out in lines 6-15 regardless of your actual expenses if they are higher than the standards. Do not include any operating ex 122C–1, and do not deduct any amounts that you subtracted from your spouse's	penses that you subtracted from income in lines 5 and 6 of Form
If your expenses differ from month to month, enter the average expense.	
Note: Line numbers 1-4 are not used in this form. These numbers apply to inform	nation required by a similar form used in chapter 7 cases.
5. The number of people used in determining your deductions from inco	me
Fill in the number of people who could be claimed as exemptions on your for plus the number of any additional dependents whom you support. This number of people in your household.	ederal income tax return, nber may be different from
National Standards You must use the IRS National Standards to answer	wer the questions in lines 6-7.
6. Food, clothing, and other items: Using the number of people you entered Standards, fill in the dollar amount for food, clothing, and other items.	d in line 5 and the IRS National \$
7. Out-of-pocket health care allowance: Using the number of people you en the dollar amount for out-of-pocket health care. The number of people is speople who are 65 or olderbecause older people have a higher IRS allow higher than this IRS amount, you may deduct the additional amount on line	olit into two categoriespeople who are under 65 and ance for health car costs. If your actual expenses are

Official Form 22C-2

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main

	Docur	nent Pa	ige 46 o	f 58			
ebtor 1 C	Cynthia Michelle Mroz-Larsen			Case number (if kr.	own)		
People v	who are under 65 years of age						
7a.	Out-of-pocket health care allowance per person	\$	49				
7b.	Number of people who are under 65	x 1					
7c.	Subtotal. Multiply line 7a by line 7b.	\$ 49.	00	Copy here=>	\$	49.00	
People v	who are 65 years of age or older						
7d.	Out-of-pocket health care allowance per person	\$ 1	17				
7e.	Number of people who are 65 or older	x 0					
7f.	Subtotal. Multiply line 7d by line 7e.	\$	00	Copy here=>	\$	0.00	
7g.	Total. Add line 7c and line 7f		\$	49.00	Copy t	total here=>	\$49.00
Hous To answ separate 8. Hou	ing and utilities - Insurance and operating expensing and utilities - Mortgage or rent expenses wer the questions in lines 8-9, use the U.S. Trustee instructions for this form. This chart may also be using and utilities - Insurance and operating expe	Program char available at the nses: Using the	ne bankrup number of	tcy clerk's offic	e.	•	pecified in the
	ne dollar amount listed for your county for insurance a	and operating ex	cpenses.			*_	451.00
	using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, fil listed for your county for mortgage or rent expenses		mount		\$ <u>1</u>	,895.00	
9b.	Total average monthly payment for all mortgages ar	nd other debts s	secured by y	our home.			
	To calculate the total average monthly payment, ad- contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.						
	Name of the creditor	Average payment	monthly				
	-NONE-	\$					
	9b. Total average monthly payment	\$	0.00	Copy here=>	S	0.00	Repeat this amount on line 33a.
9c.	Net mortgage or rent expense.			_			
	Subtract line 9b (total average monthly payment) fro or rent expense). If this number is less than \$0, enter		tgage	\$	1,895.00	Copy here=>	\$ 1,895.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Explain why:

Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Case 17-12857-BFK Document Page 47 of 58

Cynthia Michelle Mroz-Larsen Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 245.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard..... 485.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Name of each creditor for Vehicle 1 payment -NONE-Repeat this Copy amount on **Total Average Monthly Payment** 0.00 0.00 here => Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 485.00 485.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Сору Repeat this here amount on line Total average monthly payment 0.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00

not claim more than the IRS Local Standard for Public Transportation.

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 48 of 58

Debtor 1 Cynthia Michelle Mroz-Larsen Case number (if known)

		In addition to the expense of the following IRS categories		s listed above	, you are allowed your monthly expenses	for		
16.	Taxes: The total monthly ar self-employment taxes, soc your pay for these taxes. Ho and subtract that number from Do not include real estate, so	\$	2,334.80					
17.	Involuntary deductions: T contributions, union dues, a		0.00					
	Do not include amounts tha	t include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.						
18.	Life Insurance: The total m filing together, include paym Do not include premiums fo of life insurance other than to	\$	73.00					
19.	Court-ordered payments: administrative agency, such Do not include payments or	as spousal or child support	payment	S.	by the order of a court or You will list these obligations in line 35.	\$	0.00	
20.	Education: The total month	ly amount that you pay for e	education	that is either	required:			
	as a condition for your jo	b, or						
	for your physically or me	ntally challenged dependen	t child if n	o public educ	ation is available for similar services.	\$	0.00	
21.	Childcare: The total month Do not include payments fo			-	sitting, daycare, nursery, and preschool.	\$	0.00	
22.	that is required for the healt by a health savings account	n and welfare of you or your . Include only the amount th	depende at is more	ents and that is e than the tota		•	284.00	
	Payments for health insurar	ce or health savings accour	nts should	d be listed only	y in line 25.	\$	204.00	
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.							
	expenses, such as those re	ported on line 5 of Official Fo	orm 122C	:-1, or any am		+\$	0.00	
24.	Add all of the expenses al			•		*\$_ \$_	6,455.80	
	•	lowed under the IRS expe	nse allov	vances.	ount you previously deducted.			
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disabilit	Iowed under the IRS expe These are additional d Note: Do not include a y insurance, and health sa	nse allow eductions ny expen avings ac	vances. s allowed by the se allowances	ount you previously deducted.	\$		
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disabilitinsurance, disabilitinsurance, disability insurance	Iowed under the IRS expe These are additional d Note: Do not include a y insurance, and health sa	nse allow eductions ny expen avings ac	vances. s allowed by the se allowances count expen	ne Means Test. Is listed in lines 6-24.	\$		
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disabilit insurance, disability insuran your dependents.	Iowed under the IRS expe These are additional d Note: Do not include a y insurance, and health sa	nse allow eductions ny expen avings ac ounts that	vances. s allowed by the se allowances count expensare reasonab	ne Means Test. Is listed in lines 6-24.	\$		
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disabilit insurance, disability insuran your dependents. Health insurance	Iowed under the IRS expe s These are additional d Note: Do not include a y insurance, and health sa ce, and health savings acco	nse allow eductions ny expen avings ac bunts that	vances. s allowed by the se allowances count expender reasonab	ne Means Test. Is listed in lines 6-24.	\$		
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disabilit insurance, disability insuran your dependents. Health insurance Disability insurance	Iowed under the IRS expe s These are additional d Note: Do not include a y insurance, and health sa ce, and health savings acco	eductions ny expen avings acounts that	vances. s allowed by the se allowances count expensare reasonab 101.64 0.00	ne Means Test. Is listed in lines 6-24.	\$		
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disability insurance, disability insurance, disability insurancy your dependents. Health insurance Disability insurance Health savings account	These are additional d Note: Do not include a y insurance, and health sace, and health sace, and health savings accordated by the same of	eductions ny expen avings actions that \$	vances. s allowed by the se allowances count expensive are reasonab 101.64 0.00 26.00	ne Means Test. Is listed in lines 6-24. Is esses. The monthly expenses for health ly necessary for yourself, your spouse, o	\$r	6,455.80	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	These are additional d Note: Do not include a y insurance, and health sace, and health sace, and health savings accordated by the same of	eductions ny expen avings actions that \$	vances. s allowed by the se allowances account expensive are reasonabed. 101.64 0.00 26.00	ne Means Test. Is listed in lines 6-24. Is esses. The monthly expenses for health ly necessary for yourself, your spouse, o	\$r	6,455.80	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disabilitinsurance, disabilitinsurance, disability insurancy our dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reas	These are additional danger include a sy insurance, and health sace, and health sace, and health sace, and health sace, and health savings according to the care of household of the care of household of the care of your immediate family who	eductions ny expen avings acounts that \$ \$ r family r and suppriso is unab	vances. s allowed by the se allowances are reasonabed. 101.64 0.00 26.00 127.64 nembers. The ort of an elder alle to pay for s	ce actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	\$r	6,455.80	
25.	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disabilitinsurance, disabilitinsurance, disability insurancy dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reasyour household or member include contributions to an all Protection against family	These are additional danger include a sy insurance, and health sace, and health sace, and health sace, and health savings account of a qualified ABLE violence. The reasonably means are a solution of a qualified ABLE violence.	eductions ny expen avings acounts that \$	vances. s allowed by the se allowances are reasonable. 101.64 0.00 26.00 127.64 nembers. The ort of an elder le to pay for se 26 U.S.C. § 5 monthly expe	ce actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	\$r	6,455.80 127.64	

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 49 of 58

btor 1	Cynthia Michelle Mroz-Larsen	Ca	ase number (if kr	nown)					
	Additional home energy costs. Your hom ine 8.	ne energy costs are included in your insurance	ce and opera	ating	expens	es on			
	If you believe that you have home energy on the fill in the excess amount of home en	on line	е						
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must ary.	show that th	ne ac	lditional		\$		0.0
9	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.	dren who are younger than 18. The monthle pendent children who are younger than 18 y	y expenses rears old to a	(not i	more that d a priva	an ate or			
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must not already accounted for in lines 6-23.	explain why	the	amount				
,	* Subject to adjustment on 4/01/19, and ev	ery 3 years after that for cases begun on or a	after the date	e of a	djustme	ent.	\$		0.0
ŀ	O. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.								
		ional allowance, go online using the link spe so be available at the bankruptcy clerk's offic		sepa	rate				
•	You must show that the additional amount	claimed is reasonable and necessary.					\$		0.0
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	e amount that you will continue to contribute inization. 11 U.S.C. § 548(d)(3) and (4).	n the form o	f cas	h or fina	ancial			
I	Do not include any amount more than 15% of your gross monthly income.								0.0
	Add all of the additional expense deduc Add lines 25 through 31.	tions.					\$_		127.64
	actions for Debt Payment								
	·								
33. Fo	or debts that are secured by an interest bans, and other secured debt, fill in lines	in property that you own, including home 33a through 33e.	mortgages	s, vei	nicle				
	o calculate the total average monthly paymeditor in the 60 months after you file for ba	ent, add all amounts that are contractually d nkruptcy. Then divide by 60.	ue to each s	ecur	ed				
	Mortgages on your home								onthly
33a.	Copy line 9b here					=>	payn \$	nent	0.00
oou.							Ψ		0.00
22h	Loans on your first two vehicles						c		0.00
33b.						=>	φ		0.00
33c.	Copy line 13e here					=>	\$		0.00
33d.	List other secured debts:								
Name	e of each creditor for other secured debt	Identify property that secures the debt		incl	es paym ude tax nsuranc	es			
					No				
	-NONE-								
	-NONE-				Yes		\$		
					No				
					Yes		\$		
					No				
					Yes	+	\$		
						7			
						Copy			
33e	Total average monthly payment. Add lines	s 33a through 33d	\$		0.00	total here:	Ι Φ		0.00

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 50 of 58

ebtor 1	Cynthia Michelle Mroz-Larsen			Case	Case number (if known)					
	-	debts that you listed in lir property necessary for yo		•	•	,				
	No.	Go to line 35.								
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill	ossession of your proper							
Name	of the	creditor	Identify property that s	ecures the deb	t	Total	cure amount		onthly c	ure
-NO	NE-				\$		÷	÷ 60 = \$	ilouiit	
								Сору		
					Total	\$	0.00	total here=>	\$	0.00
		owe any priority claims - s				at				
ar	e past	due as of the filing date of	of your bankruptcy case	?? 11 U.S.C. §	507.					
		Go to line 36.								
	Yes.	Fill in the total amount of a ongoing priority claims, su			le current or					
		Total amount of all past-	•			\$	0.00	÷ 60	\$	0.00
36. P r	ojecte	d monthly Chapter 13 pla	n payment			\$	606.00			
Of the To	fice of Exec find a l	multiplier for your district as the United States Courts (foutive Office for United State ist of district multipliers that incl nstructions for this form. This lis	or districts in Alabama and s s Trustees (for all other of a substitution of substitution of the substitut	d North Caroli districts). using the link sp	na) or by	x	7.90			
A۱	/erage	monthly administrative exp	ense			\$	47.87	Copy total		47.87
		of the deductions for debes 33e through 36.	ot payment.						\$	47.87
Total	Deduc	tions from Income								
38. A o	dd all d	of the allowed deductions								
		ne 24, All of the expenses a e allowances	llowed under IRS	\$	6,455.80	_				
C	Copy lir	ne 32, All of the additional e	xpense deductions	\$	127.64	_				
C	Copy lir	ne 37, All of the deductions	for debt payment	+\$	47.87					
7	otal d	aductions		•	6.631.31		Convitotal here->		\$	6.631.31

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 51 of 58

ebtor 1 Cynthia Michelle Mroz-Larsen			Case	numb	er (if known)			
art 2:	Determine `	Your Disposable Income Under 11 U.S.	C. § 1325	(b)(2)				
		current monthly income from line 14 of ur Current Monthly Income and Calcula					\$	7,650.91
ch dis red	ildren. The mosability payment ceived in accord	nably necessary income you receive for nothly average of any child support payment is for a dependent child, reported in Part I lance with applicable nonbankruptcy law to expended for such child.	care payments, or 22C-1, that you	\$	0.	.00		
em in	nployer withheld 11 U.S.C. § 541	d retirement deductions. The monthly to from wages as contributions for qualified (b)(7) plus all required repayments of loads.C. § 362(b)(19).	retiremen	nt plans, as specified	\$	582	.08	
42. To	tal of all deduc	tions allowed under 11 U.S.C. § 707(b)	(2)(A). Co	ppy line 38 here=>	\$	6,631	.31	
ex the	penses and you eir expenses. Yo	ecial circumstances. If special circumstances is have no reasonable alternative, describe our must give your case trustee a detailed didocumentation for the expenses.	the spec	ial circumstances and				
Descr	ibe the special	circumstances		Amount of exper	ise			
				\$				
				\$				
				\$				
			Total \$	0.00	Cop	oy e=> \$ 	0.00	
44. To	tal adjustment	s. Add lines 40 through 43.		=>		7,213.39	Copy here=> -\$	7,213.39
	·	onthly disposable income under § 132	5(b)(2). S	ubtract line 44 from lin	ie 39).	\$	437.52
ha tim yo	nange in incom ve changed or a ne your case wil u filed your peti	ncome or Expenses The or expenses. If the income in Form 12 are virtually certain to change after the day I be open, fill in the information below. Fo the change after the increase occurred, and fill in when the increase occurred, and fill	te you file r example er line 2 i	d your bankruptcy peti e, if the wages reported n the second column,	ition d inc	and during the reased after		
Form	Line	Reason for change		Date of change		Increase or decrease?	Amount of o	hange
☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122	C-2 C-1 C-2 C-1				_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease	\$ \$ \$	
☐ 122 ☐ 122						☐ Increase ☐ Decrease	\$	

Case 17-12857-BFK Doc 1 Filed 08/22/17 Entered 08/22/17 14:07:41 Desc Main Document Page 52 of 58

Deptor 1	Cynthia Michelle Mroz-Larsen	Case number (If known)	_
Part 4:	Sign Below		
В	by signing here, under penalty of perjury you declare that the inform	nation on this statement and in any attachments is true and correct.	
_	/s/ Cynthia Michelle Mroz-Larsen Cynthia Michelle Mroz-Larsen Signature of Debtor 1		
	August 17, 2017 MM / DD / YYYY		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Amex Correspondence Po Box 981540 El Paso, TX 79998

At&T Universal Citi Card Po Box 6500 Sioux Falls, SD 57117

Citibank/The Home Depot Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

Comenity Bank Po Box 182125 Columbus, OH 43218

Discover Financial Services P.O. Box 30943 Salt Lake City, UT 84130-0943

Equitableacc 1200 Ford Road Minnetonka, MN 55305

Fed Loan Serv Pob 60610 Harrisburg, PA 17106

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Michael Larsen 2121 Willhite Rd Waterford, MI 48327 Ocwen Loan Servicing, Llc Attn: Research/Bankruptcy 1661 Worthington Rd Ste 100 West Palm Bch, FL 33409

Prosper Marketplace Inc Po Box 396081 San Francisco, CA 94139

Seterus Inc 14523 Sw Millikan Way St Beavertton, OR 97005

Sst/suntrust 4315 Pickett Rd Saint Joseph, MO 64503

Synchrony Financial PO Box 960061 Orlando, FL 32896

US Bank/Rms CC Card Member Services Po Box 108 St Louis, MO 63166

Wyndham Vacation Resorts 6277 Sea Harbor Drive Orlando, FL 32821